

# STRATEGIC PLAN FY 2008

July 2007 to June 2011

Idaho Board of Nursing

**Idaho Board of Nursing**

**STRATEGIC PLAN**

**FY 2008**

**For the period July 1, 2007 to June 30, 2011**

**Submitted:**

**July 1, 2007**

Signed:



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*Sandra Evans, MAEd, RN, Executive Director*

Approved:



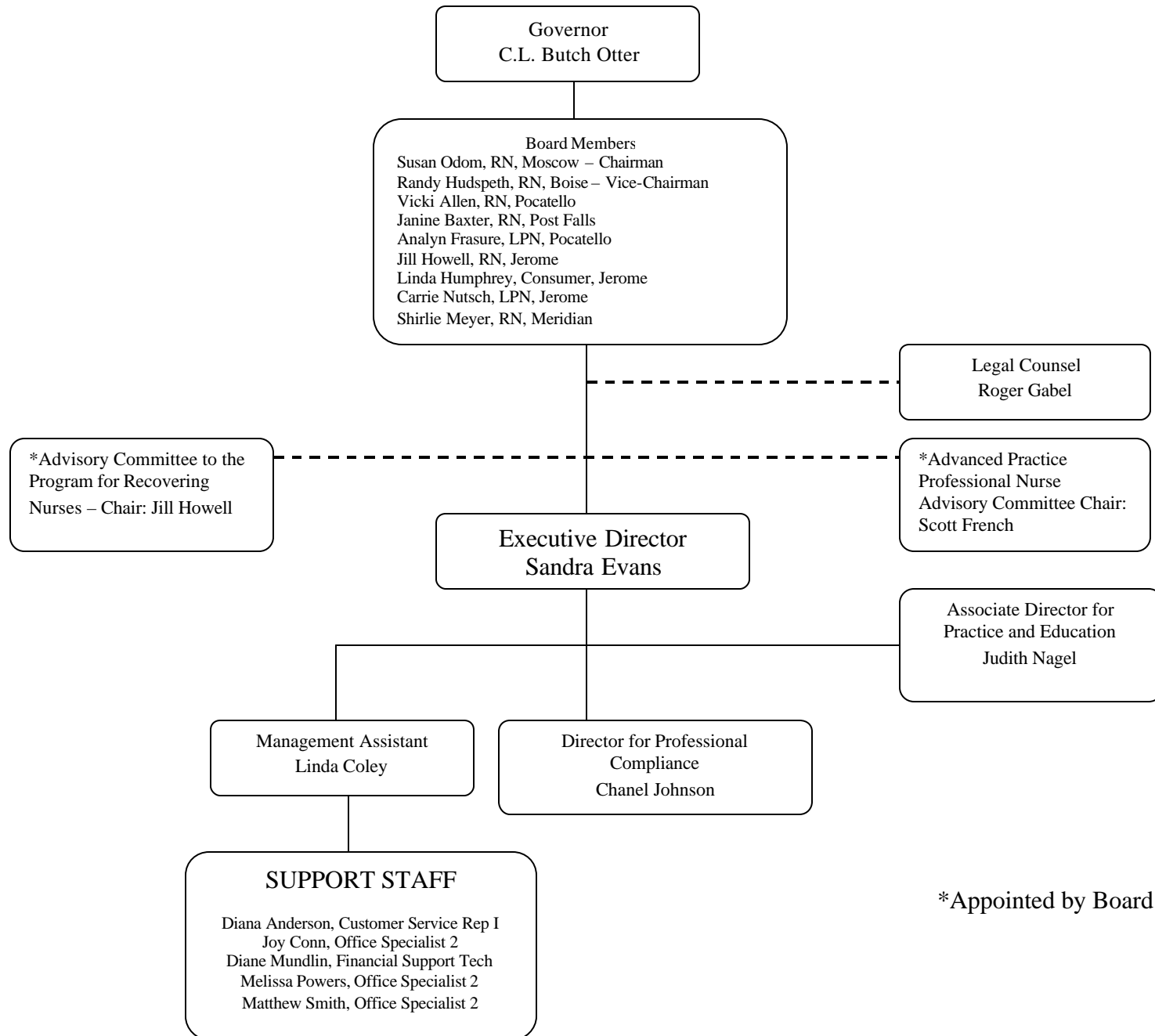
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*Susan Odom, PhD, RN, Chairman*

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# ORGANIZATIONAL CHART BOARD OF NURSING



## MISSION STATEMENT

The Mission of the Idaho Board of Nursing is to regulate nursing practice and education for the purpose of safeguarding the public health, safety and welfare.

## VISION

*Idaho Board of Nursing... The Model for Excellence*

- ◆ *Excellence in Nurse Licensing*
- ◆ *Excellence in Nursing Practice*
- ◆ *Excellence in Nursing Education*

The Board envisions continual pursuit of excellence: excellence in nurse licensing, nursing practice, and nursing education. To this end, excellence is validated by recognition for best practice, meeting or exceeding national standards, and application of benchmark strategies. Excellence is determined within the context of space and time, and may be influenced by inputs such as new knowledge, evolving science and technology, and dynamic partnerships. The Board is and will always be vigilant in maintaining or strengthening public safeguards while eliminating or preventing unnecessary barriers for Idaho's workforce.

## GOALS OF THE BOARD OF NURSING

- ✧ **LICENSURE GOAL:** To License Qualified Persons for the Practice of Nursing
- ✧ **PRACTICE GOAL:** To Determine, Communicate, and Enforce Standards of Conduct and Standards of Nursing Practice
- ✧ **EDUCATION GOAL:** To Determine, Communicate and Enforce Standards for Educational Programs Preparing Nurses for Practice at all Levels
- ✧ **GOVERNANCE GOAL:** To Assure the Governance Framework and Culture Supports the Accomplishment of the Board's Vision, Mission and Goals
- ✧ **INFORMATION EXCHANGE GOAL:** To Facilitate Information Exchange between the Board and its Colleagues, Constituent Groups, and other Agencies in Order to Fulfill the Board's Vision and Mission
- ✧ **ORGANIZATIONAL GOAL:** To Assure the Organizational Infrastructure Supports the Vision, Mission and Goals of the Idaho Board of Nursing

# VALUES

The Board of Nursing has endorsed the following values for application within all Board activities and decisions, including those delegated to staff, appointed bodies, and contractors.

## **Values**

## **Value Definitions**

### **Integrity**

*Being honorable, forthright, and acting with conviction based upon a firm intention to do the right thing for the right reason.*

### **Accountability**

*Taking responsibility to see that organizational processes are consistently applied toward outcomes.*

### **Collaboration**

*Working with others to reach solutions.*

### **Quality**

*Implementing best practices in all endeavors.*

### **Respect**

*Acting with consideration and attentiveness in all encounters.*

### **Leadership**

*Using knowledge and experience to influence the perceptions, understanding and behaviors of others.*

LICENSURE GOAL:  
To  
License  
Qualified Persons  
for the Practice  
of  
Nursing



## Licensure Goal: To License Qualified Persons for the Practice of Nursing

### Specific Objectives Directed toward Nurse Licensure Goal Achievement

<i>Objectives</i>	<i>Performance Measure</i>
L.1. Assessment of the continued competence of licensed nurses	▪ Implementation of requirements for demonstrated continued competence as a condition of licensure by endorsement, reinstatement and renewal
L.2. Interstate mutual recognition of APPN licensure	▪ Adoption/implementation of APRN Compact
L.3. Regulation of medication assistant practice and education	▪ Implementation of medication assistant regulatory processes
L.4. Customer focused processes for licensure: <ul style="list-style-type: none"><li>▪ ↓time to process application</li><li>▪ ↓complexity for applicants</li><li>▪ ↓unnecessary barriers</li></ul>	▪ Meet or exceed 75% of 'best practices' for licensure as defined through CORE
L.5. Interstate mutual recognition of RN, LPN licensure	▪ Participation in the Nurse Licensure Compact
L.6. On-going responsibilities related to licensure by: <ul style="list-style-type: none"><li>▪ Exam</li><li>▪ Endorsement</li><li>▪ Reinstatement</li><li>▪ Renewal</li><li>▪ Temporary/Limited License</li></ul>	▪ Issuance of licenses to applicants who meet established criteria
L.7. Licensure standards that allow for responsiveness to changes in the healthcare environment	▪ Key issues affecting nurse licensure are addressed by the Board as evidenced in meeting minutes, reports and reflected in statute and rules

### Key Factors External to the Board Which May Affect Nurse Licensure Goal Achievement

- Advances in technology
- Decisions on the future regulation of APPNs
- Introduction of new licensure categories
- Evolving trends in how to measure continued competence
- Effects of the nurse shortage

**GOAL: TO LICENSE QUALIFIED PERSONS FOR THE PRACTICE OF NURSING**

<b>Objective</b>	<b>Performance Measure</b>	<b>Benchmarks</b>	<b>Responsibility Assigned</b>	<b>Timeframe</b>
<i>L.1. Assessment of the continued competence of licensed nurses</i>	- Implementation of requirements for demonstrated continued competence as a condition of licensure by endorsement, reinstatement and renewal	<ul style="list-style-type: none"> <li>Analyze models for measuring continued competence</li> <li>Determine the Model</li> <li>Pilot the process</li> <li>Promulgate rules for demonstrating continued competence</li> </ul>	<ul style="list-style-type: none"> <li>Staff &amp; Board</li> <li>Board</li> <li>Staff</li> <li>Staff</li> </ul>	<ul style="list-style-type: none"> <li>FY 2008-09</li> <li>FY 2009</li> <li>FY 2010</li> <li>FY 2011</li> </ul>
<i>L.2. Interstate mutual recognition of APPN Licensure</i>	- Adoption/implementation of APRN Compact	<ul style="list-style-type: none"> <li>Adopt uniform APPN licensure standards</li> <li>Determine and implement the timeline to proceed with adoption of the APRN Compact</li> </ul>	<ul style="list-style-type: none"> <li>Board</li> <li>Board</li> </ul>	<ul style="list-style-type: none"> <li>FY 2009</li> <li>FY 2010</li> </ul>
<i>L.3. Regulation of medication assistant practice and education</i>	- Implementation of medication assistant regulatory processes	<ul style="list-style-type: none"> <li>Initiate negotiated rulemaking for implementation of HB157</li> <li>Implement rules</li> <li>Prepare operational processes, incl. forms, databases, policies, procedures, etc.</li> <li>Approve the proposed MA-C curriculum</li> </ul>	<ul style="list-style-type: none"> <li>Board &amp; Staff</li> <li>Board &amp; Staff</li> <li>Staff</li> <li>Board</li> </ul>	<ul style="list-style-type: none"> <li>FY 2008</li> <li>FY 2008</li> <li>FY2008</li> <li>FY 2008</li> </ul>
<i>L.4. Customer focused processes for licensure:</i> <ul style="list-style-type: none"> <li>? time to process application</li> <li>? complexity for applicants</li> <li>? unnecessary barriers</li> </ul>	-Meet or exceed 75% of 'best practices' for licensure as defined through CORE	<ul style="list-style-type: none"> <li>Identify CORE best practices re: licensure</li> <li>Analyze current processes to determine opportunities for improvement</li> <li>Implement best practices</li> </ul>	<ul style="list-style-type: none"> <li>Staff</li> <li>Staff</li> <li>Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>FY 2008</li> <li>FY 2008</li> <li>Ongoing</li> </ul>

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
<i>L.5. Interstate mutual recognition of RN, LPN licensure</i>	-Participation in the Nurse Licensure Compact	<ul style="list-style-type: none"> <li>Participate as an active member of the Nurse Licensure Compact Administrators (NLCA)</li> <li>Collaborate with other states implementing the Nurse Licensure Compact</li> <li>Analyze the impact of the Nurse Licensure Compact on practice, discipline and Board operation in Idaho</li> <li>Assist other states in adopting the Compact</li> </ul>	<ul style="list-style-type: none"> <li>Staff</li> <li>Staff</li> <li>Board &amp; Staff</li> <li>Staff</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> <li>Ongoing</li> <li>FY 2008, 2012</li> <li>Ongoing</li> </ul>
<i>L.6. Ongoing responsibilities related to licensure by</i> <ul style="list-style-type: none"> <li>Exam</li> <li>Endorsement</li> <li>Reinstatement</li> <li>Renewal</li> <li>Temporary/Limited License</li> </ul>	-Issuance of licenses to applicants who meet established criteria	<ul style="list-style-type: none"> <li>Assess current operations re: licensure</li> <li>Refine processes for efficiency/effectiveness</li> <li>Enhance opportunities for electronic transactions re: licensure</li> </ul>	<ul style="list-style-type: none"> <li>Staff</li> <li>Staff</li> <li>Staff</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> <li>Ongoing</li> <li>FY 2009</li> </ul>
<i>L.7. Licensure standards that allow for responsiveness to changes in the healthcare environment</i>	-Key issues affecting nurse licensure are addressed by the Board as evidenced in meeting minutes, reports and reflected in statute and rules	<ul style="list-style-type: none"> <li>Analyze trends related to nursing practice and develop strategies to address</li> <li>Review licensure statute and rules for relevance, effectiveness</li> </ul>	<ul style="list-style-type: none"> <li>Board &amp; Staff</li> <li>Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>FY 2008</li> <li>FY 2012</li> </ul>

PRACTICE GOAL:  
To Determine,  
Communicate, and Enforce  
Standards of Conduct  
and  
Standards  
of  
Nursing Practice

## **Practice Goal: To Determine, Communicate and Enforce Standards of Conduct and Standards of Nursing Practice**

### **Specific Objectives Directed toward Nursing Practice Goal Achievement**

<i>Objectives</i>	<i>Performance Measure</i>
P.1. Administer an effective alternative to discipline for nurses impaired by chemical use and mental/physical illness	▪ Eligible licensees enroll in and successfully complete PRN or are disciplined for non-compliance
P.2. Identification of causal relationship trends in cases involving practice breakdown	▪ Nursing practice errors are identified and root cause determined
P.3. Assessment of competence of individuals seeking to re-enter practice	▪ Criteria for re-entry to practice are applied for licensure by reinstatement and endorsement
P.4. Conduct and practice standards that allow responsiveness to changes in the healthcare environment	▪ Key issues affecting standards of conduct and practice are addressed as evidenced in meeting minutes, reports and as reflected in statute and rules
P.5. Fair, efficient management of disciplinary complaints from receipt to resolution that is appropriate for public protection	▪ Meet or exceed 75% of 'best practices' related to discipline as defined through CORE

### **Key factors External to the Board Which May Affect Nursing Practice Goal Achievement**

- NCSBN progress toward research on alternative program effectiveness
- Healthcare economics
- Nurse shortage
- Development and evolution of national practice standards

**GOAL: TO DETERMINE, COMMUNICATE, AND ENFORCE STANDARDS OF CONDUCT AND STANDARDS OF NURSING PRACTICE**

<b>Objective</b>	<b>Performance Measure</b>	<b>Benchmarks</b>	<b>Responsibility Assigned</b>	<b>Timeframe</b>
<i>P.1. Administer an effective alternative to discipline for nurses impaired by chemical use and mental/physical illness</i>	-Eligible licensees enroll in and successfully complete PRN or are disciplined for non-compliance	<ul style="list-style-type: none"> <li>▪ Conduct/participate in research project(s) that provide evidence of PRN effectiveness</li> <li>▪ Assess the PRN vendor's adherence to contract terms</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff &amp; Board</li> <li>▪ Board &amp; PRNAC</li> </ul>	<ul style="list-style-type: none"> <li>▪ FY 2008-10</li> <li>▪ Ongoing</li> </ul>
<i>P.2. Identification of causal relationship trends in cases involving practice breakdown</i>	-Nursing practices are identified and root cause determined	<ul style="list-style-type: none"> <li>▪ Implement TERCAP</li> <li>▪ Identify system vs individual errors resulting in practice breakdown</li> <li>▪ Facilitate the implementation of corrective strategies</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ FY 2008</li> <li>▪ FY 2008 then Ongoing</li> <li>▪ FY 2009 then ongoing</li> </ul>
<i>P.3. Assessment of competence of individuals seeking to re-enter practice</i>	-Criteria for re-entry to practice are applied for licensure by reinstatement and endorsement	<ul style="list-style-type: none"> <li>▪ Apply re-entry policies</li> <li>▪ Review policies and revise as necessary</li> </ul>	<ul style="list-style-type: none"> <li>▪ Board &amp; Staff</li> <li>▪ Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ Ongoing</li> </ul>
<i>P.4. Conduct and practice standards that allow responsiveness to changes in the healthcare environment</i>	-Key issues affecting standards of conduct and practice are addressed as evidenced in meeting minutes, reports and as reflected in statute and rules	<ul style="list-style-type: none"> <li>▪ Analyze trends related to nursing practice and develop strategies to address</li> <li>▪ Assess statute &amp; rules for relevance to practice trends</li> <li>▪ Modify statutes and rules as necessary</li> </ul>	<ul style="list-style-type: none"> <li>▪ Board &amp; Staff</li> <li>▪ Board &amp; Staff</li> <li>▪ Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ FY 2008</li> <li>▪ FY 2009</li> </ul>

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
<i>P.5. Fair, efficient management of disciplinary complaints from receipt to resolution that is appropriate for public protection</i>	-Meet or exceed 75% of ‘best practices’ related to discipline as defined through CORE	<ul style="list-style-type: none"> <li>▪ Receive, investigate, substantiate and resolve disciplinary complaints in a timely manner</li> <li>▪ Enhance the process of informing the public about procedures for reporting concerns and complaints related to nursing practice</li> <li>▪ Analyze cost and effectiveness of disciplinary procedures</li> <li>▪ Update policies and procedures for complaint processing</li> <li>▪ Identify CORE ‘best practices’</li> </ul>	<ul style="list-style-type: none"> <li>▪ Board &amp; Staff</li> <li>▪ Board &amp; Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ FY 2008</li> <li>▪ FY 2008</li> <li>▪ FY 2008</li> <li>▪ FY 2008</li> </ul>

# EDUCATION GOAL:

To Determine,  
Communicate and Enforce Standards  
for  
Educational Programs Preparing  
Nurses for Practice  
at all Levels



## **Nursing Education Goal: To Determine, Communicate and Enforce Standards for Educational Programs Preparing Nurses for Practice at All Levels**

### **Specific Objectives Directed toward Nursing Education Goal Achievement**

<i>Objectives</i>	<i>Performance Measure</i>
E.1. Education programs prepare graduates for safe practice at the entry level	<ul style="list-style-type: none"> <li>Graduates of approved programs demonstrate beginning-level competence as evidenced by NCLEX pass rates, employer satisfaction</li> </ul>
E.2. New nursing education programs are consistent with an adopted statewide plan for current and future nursing education	<ul style="list-style-type: none"> <li>Board decisions related to approval of new nursing education programs are based on criteria agreed to in an adopted statewide plan</li> </ul>
E.3. Standards for nursing education that allow for responsiveness to changes in the academic environment	<ul style="list-style-type: none"> <li>Key issues affecting nursing education are addressed by the Board as evidenced in meeting minutes, reports and as reflected in statute and rules</li> </ul>
E.4. Nursing education programs meet adopted standards and criteria	<ul style="list-style-type: none"> <li>Board decisions related to continued approval of nursing education programs are based on the application of defined criteria</li> </ul>

### **Key Factors External to the Board Which May Affect Nursing Education Goal Achievement**

- Changing nature and methods of educational delivery
- Alternative education delivery related to clinical education, e.g. location of the patient population, simulation methods, decrease in available clinical sites, etc.
- Nurse shortage
- Nurse faculty shortage
- Influx of proprietary programs
- Statewide progress on development of a long-range plan for nursing education

**GOAL: TO DETERMINE, COMMUNICATE, AND ENFORCE STANDARDS FOR EDUCATION PROGRAMS PREPARING NURSES FOR PRACTICE AT ALL LEVELS**

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
<i>E.1. Education programs prepare graduates for safe practice at the entry level</i>	-Graduates of approved programs demonstrate beginning level competence as evidenced by NCLEX pass rates, employer satisfaction	<ul style="list-style-type: none"> <li>Review/revise rules in relation to NCSBN model rules, distance, on-line, traditional and non-traditional programs</li> <li>Promulgate rules</li> </ul>	<ul style="list-style-type: none"> <li>Rules Revision Task Force</li> <li>Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>FY 2010</li> <li>FY 2011</li> </ul>
<i>E.2. New nursing education programs are consistent with an adopted statewide plan for current and future nursing education</i>	-Board decisions related to approval of new nursing education programs are based on criteria agreed to in an adopted statewide plan	<ul style="list-style-type: none"> <li>Support development of a statewide plan for nursing education</li> <li>Implement strategies necessary to support the plan</li> <li>Review and approve educational programs as defined</li> </ul>	<ul style="list-style-type: none"> <li>Board</li> <li>Board</li> <li>Staff</li> </ul>	<ul style="list-style-type: none"> <li>FY 2008</li> <li>FY 2008-09</li> <li>Ongoing</li> </ul>
<i>E.3. Standards for nursing education that allow responsiveness to changes in the academic environment</i>	-Key issues affecting nursing education are addressed by the Board as evidenced in meeting minutes, reports and as reflected in statute and rules	<ul style="list-style-type: none"> <li>Analyze trends related to nursing education and develop strategies to address</li> <li>Assess statute and rules for relevance to current academic practices and the changing healthcare environment</li> <li>Modify statute and rules as necessary</li> </ul>	<ul style="list-style-type: none"> <li>Board &amp; Staff</li> <li>Board &amp; Staff</li> <li>Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>Ongoing</li> <li>FY 2010</li> <li>FY 2011</li> </ul>
<i>E.4. Nursing education programs meet adopted standards and criteria</i>	- Board decisions related to continued approval of nursing education programs are based on the application of defined criteria	<ul style="list-style-type: none"> <li>Analyze program criteria defined by the Board, the State Board of Education, nursing education accrediting organizations and others for similarity and differences</li> <li>Process applications for program approval</li> <li>Approve programs that meet established criteria</li> </ul>	<ul style="list-style-type: none"> <li>Staff</li> <li>Staff</li> <li>Board</li> </ul>	<ul style="list-style-type: none"> <li>FY 2007</li> <li>FY 2008</li> <li>FY 2008</li> </ul>

# GOVERNANCE GOAL:

To Assure the Governance  
Framework  
and Culture Supports  
the  
Accomplishment  
of the  
Board's Vision, Mission  
and Goals

## **Governance Goal: To Assure the Governance Framework and Culture Supports the Accomplishment of the Board's Vision, Mission and Goals**

### **Specific Objectives Directed toward Governance Goal Achievement**

<i>Objectives</i>	<i>Performance Measure</i>
G.1. Board performance is consistent with the Board's adopted model of policy governance	<ul style="list-style-type: none"> <li>Board self-assessment indicates that the Board incorporates principles of policy governance in accomplishment of Mission and goals</li> </ul>
G.2. Board performance is consistent with the Vision, Mission, values and strategic plan	<ul style="list-style-type: none"> <li>Board assessment indicates accomplishment of Mission, progress toward Vision, adherence to values and use of strategic thinking</li> </ul>
G.3. Competent Board members	<ul style="list-style-type: none"> <li>Annual Board self-assessment indicates Board and Board member competence</li> <li>Board decisions reflect consistency with Mission and Vision</li> <li>Board decisions, when challenged, are upheld</li> </ul>
G.4. Collaboration with stakeholders both in and outside of nursing	<ul style="list-style-type: none"> <li>Board assessment processes indicate collaboration with stakeholders</li> </ul>
G.5. Accomplishment of the respective missions of the Advanced Practice Professional Nurse and Program for Recovering Nurses Advisory Committees	<ul style="list-style-type: none"> <li>Annual APPNAC and PRNAC self-assessments indicate accomplishment of their respective purposes</li> </ul>
G.6. Board responsiveness to state and national healthcare policy decisions	<ul style="list-style-type: none"> <li>Active Board involvement in a variety of healthcare policy arenas</li> </ul>

### **Key Factors External to the Board Which May Affect Governance Goal Achievement**

- Change in Board Membership
- Agency budget appropriation
- Change in Board staff
- Changing healthcare environment
- Trends in governance models

**GOAL: TO ASSURE THE GOVERNANCE FRAMEWORK AND CULTURE SUPPORTS THE ACCOMPLISHMENT OF THE BOARD'S VISION, MISSION AND GOALS**

<b>Objective</b>	<b>Performance Measure</b>	<b>Benchmarks</b>	<b>Responsibility Assigned</b>	<b>Timeframe</b>
<i>G.1. Board performance is consistent with the Board's adopted model of policy governance</i>	-Board self-assessment indicates that the Board incorporates principles of policy governance in accomplishment of Mission and goals	<ul style="list-style-type: none"> <li>▪ Educate Board members on principles of policy governance</li> <li>▪ Self-assessment measures Board adherence to governance principles</li> <li>▪ Board practices focus on outputs not activities</li> </ul>	<ul style="list-style-type: none"> <li>▪ Board &amp; Staff</li> <li>▪ Board</li> <li>▪ Board</li> </ul>	<ul style="list-style-type: none"> <li>▪ New Board member orientation and quarterly CE</li> <li>▪ Annual</li> <li>▪ Ongoing</li> </ul>
<i>G.2. Board performance is consistent with the Vision, Mission, values and strategic plan</i>	-Board assessment indicates accomplishment of Mission, progress toward Vision, adherence to values and use of strategic thinking	<ul style="list-style-type: none"> <li>▪ Review Board processes, policies and decisions to assure internal congruence with Vision, Mission, values, and strategic plan</li> <li>▪ Revise processes and policies to assure congruence</li> <li>▪ Review and revise self-assessment instrument and procedure to assure relevance to Vision, Mission, values and strategic plan</li> </ul>	<ul style="list-style-type: none"> <li>▪ Board, Governance Committee, &amp; Staff</li> <li>▪ Board, Governance Committee &amp; Staff</li> <li>▪ Staff and Governance Committee</li> </ul>	<ul style="list-style-type: none"> <li>▪ Annually</li> <li>▪ Annually</li> <li>▪ Annually</li> </ul>
<i>G.3. Competent Board members</i>	<ul style="list-style-type: none"> <li>-Annual Board self-assessment indicates Board and Board-member competence;</li> <li>-Board decisions reflect consistency with Mission and Vision; and</li> <li>-Board decisions, when challenged, are upheld</li> </ul>	<ul style="list-style-type: none"> <li>▪ Orient new Board members</li> <li>▪ Provide ongoing Board education relative to: <ul style="list-style-type: none"> <li>○ Specific issues</li> <li>○ Ongoing Board processes and projects</li> </ul> </li> <li>▪ Plan and conduct a retreat for Board members targeting focused Board development</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ At time of appointment</li> <li>▪ Ongoing</li> <li>▪ FY 2008</li> </ul>

<b>Objective</b>	<b>Performance Measure</b>	<b>Benchmarks</b>	<b>Responsibility Assigned</b>	<b>Timeframe</b>
<i>G.4. Collaboration with stakeholders both in and outside of nursing</i>	-Board assessment processes indicate collaboration with stakeholders	<ul style="list-style-type: none"> <li>▪ Include public forum with each formal Board meeting</li> <li>▪ Include public members on Board committees and panels</li> <li>▪ Use negotiated rulemaking processes</li> <li>▪ Identify stakeholders for each major initiative and engage partnerships as appropriate</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Board</li> <li>▪ Staff</li> <li>▪ Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Each scheduled Board meeting</li> <li>▪ Ongoing</li> <li>▪ During rulemaking</li> <li>▪ Ongoing</li> </ul>
<i>G.5. Accomplishment of APPNAC and PRNAC respective missions</i>	-APPNAC and PRNAC annual self-assessments indicate accomplishment of their respective purposes	<ul style="list-style-type: none"> <li>▪ Appoint members to committees</li> <li>▪ Refine purpose and goals of committees</li> <li>▪ Committee self-assessment evaluates accomplishment of mission</li> </ul>	<ul style="list-style-type: none"> <li>▪ Board</li> <li>▪ Board</li> <li>▪ Committee</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ Annually</li> <li>▪ Annually</li> </ul>
<i>G.6. Board responsiveness to state and national healthcare policy decisions</i>	- Active Board involvement in a variety of healthcare policy arenas	<ul style="list-style-type: none"> <li>▪ Participate in meetings and forums regarding health care planning and decision-making</li> <li>▪ Maintain positive relationships with key policy makers and others who influence policy</li> </ul>	<ul style="list-style-type: none"> <li>▪ Board &amp; Staff</li> <li>▪ Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ Ongoing</li> </ul>

# **INFORMATION EXCHANGE GOAL:**

**To Facilitate Information Exchange  
between the Board and its Colleagues,  
Constituent Groups,  
and other Agencies  
in Order to Fulfill the  
Board's  
Vision and Mission**

## **Information Exchange Goal: To Facilitate Information Exchange between the Board and its Colleagues, Constituent Groups, and other Agencies in Order to Fulfill the Board's Vision and Mission**

### **Specific Objectives Directed toward Information Exchange Goal Achievement**

<i>Objectives</i>	<i>Performance Measure</i>
I. 1. Public awareness of Board Mission and role	<ul style="list-style-type: none"> <li>▪ Mission and role of the Board are presented to a diverse audience in a variety of formats</li> </ul>
I.2. Effective communication with the public, including licensees, employers, policy makers and consumers	<ul style="list-style-type: none"> <li>▪ Positive feedback related to communication with the Board is received</li> <li>▪ CORE research findings indicate positive communications with constituents</li> </ul>
I.3. Accurate, comprehensive, accessible nurse licensure data	<ul style="list-style-type: none"> <li>▪ Information necessary for licensure verification and reporting, nursing workforce research and policy-decisions is maintained and made available</li> </ul>
I.4. Information provided to appropriate state and national entities for purposes of public protection	<ul style="list-style-type: none"> <li>▪ Required information is accurately and timely reported to NURSYS, the NPDB and the HIPDB</li> </ul>

### **Key Factors External to the Board Which May Affect Information Exchange Goal Achievement**

- State of Idaho support, particularly technology support to Board systems
- Technology hardware maintenance and replacement costs
- Software upgrades for systems protection
- Challenges to/revisions of the Idaho Public Information Act



**GOAL: TO Facilitate Information Exchange between the Board and its Colleagues, Constituent Groups, and other Agencies in Order to Fulfill the Board's Vision and Mission**

<b>Objective</b>	<b>Performance Measure</b>	<b>Benchmarks</b>	<b>Responsibility Assigned</b>	<b>Timeframe</b>
<i>I.1. Public awareness of Board Mission and role</i>	- Mission and role of the Board are presented to a diverse audience in a variety of formats	<ul style="list-style-type: none"> <li>▪ Maintain website</li> <li>▪ Publish newsletters and reports</li> <li>▪ Develop/update flyers and brochures</li> <li>▪ Respond to inquiries, requests</li> <li>▪ Participate in forums, present information, etc.</li> <li>▪ Plan Board Centennial celebration</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Board &amp; Staff</li> <li>▪ Staff</li> <li>▪ Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ FY 2009-11</li> </ul>
<i>I.2. Effective communication with the public, including licensees, employers, policy makers and consumers</i>	<ul style="list-style-type: none"> <li>-Positive feedback related to communication with the Board is received</li> <li>-CORE research findings indicate positive communications with constituents</li> </ul>	<ul style="list-style-type: none"> <li>▪ Upgrade communications technology consistent with IT plan</li> <li>▪ Analyze and address specific communication concerns</li> <li>▪ Identify CORE 'best practices' related to communication</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ FY 2008</li> </ul>
<i>I.3. Accurate, comprehensive, accessible nurse licensure data</i>	- Information necessary for licensure verification and reporting, workforce research and policy decisions is maintained and made available	<ul style="list-style-type: none"> <li>▪ Analyze and revise minimum data set as needed</li> <li>▪ Maintain and upgrade technology for access to data and ease of use</li> <li>▪ Incorporate technological tools necessary to protect privacy and maintain confidentiality of data</li> <li>▪ Timely publish the Board's Annual Statistical Report</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Board/Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ Annual</li> </ul>
<i>I.4. Information is provided to appropriate state and national entities for purposes of public protection</i>	-Required information is accurately and timely reported to NURSYS, the NPDB and HIPDB	<ul style="list-style-type: none"> <li>▪ Maintain the NCSBN report agent contract</li> <li>▪ Transition to use of revised HIPDB/NURSYS coding</li> </ul>	<ul style="list-style-type: none"> <li>▪ Board &amp; Staff</li> <li>▪ Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ FY 2008</li> </ul>

ORGANIZATIONAL GOAL:

**To Assure the Organizational  
Infrastructure  
Supports the Vision, Mission  
and  
Goals  
of the  
Idaho Board of Nursing**

## Organization Goal: To Assure the Organizational Infrastructure Supports the Vision, Mission and Goals of the Idaho Board of Nursing

### Specific Objectives Directed toward Organization Goal Achievement

<i>Objectives</i>	<i>Performance Measure</i>
O.1. Adequate Board resources: <ul style="list-style-type: none"> <li>▪ Revenue adequate to meet expenses</li> <li>▪ Qualified personnel</li> <li>▪ Up-to-date equipment/technology</li> </ul>	▪ Annual budget and FTP appropriation support accomplishment of Mission and strategic goals
O.2. Staff activities facilitate the Board's accomplishment of Mission and strategic goals.	▪ Positive annual Board self-assessment related to support by staff
O.3. Expectations of the public, licensees, Legislature and Governor about the Board are adequately met	<ul style="list-style-type: none"> <li>▪ Board is recognized for CORE 'best practices'</li> <li>▪ Positive feedback is received from constituent groups</li> </ul>
O.4. Competent staff	▪ Staff meet annual performance expectations for key job responsibilities, customer service and interpersonal relationships
O.5. Staff compensation recognizes performance, longevity, outstanding contributions and market trends and retains exemplary workers	▪ Staff compensation is consistent with the Board's philosophy and governance policy and is consistent with legislative directives
O.6. Office of the Board supports the day-to-day operation of the organization	▪ The office of the Board of Nursing, including physical location, space and furnishings, equipment and staff, support the day-to-day operation of the Board

### Key Factors External to the Board Which May Affect Organization Goal Achievement

- Trends in market cost of office space
- Unanticipated staff turnover
- Legislative directives and appropriations in the areas of operations, capital, and employee compensation

**GOAL: TO ASSURE THE ORGANIZATIONAL INFRASTRUCTURE SUPPORTS THE VISION, MISSION AND GOALS OF THE IDAHO BOARD OF NURSING**

<b>Objective</b>	<b>Performance Measure</b>	<b>Benchmarks</b>	<b>Responsibility Assigned</b>	<b>Timeframe</b>
<i>O.1. Adequate resources:</i> <ul style="list-style-type: none"> <li>▪ Revenue adequate to meet expenses</li> <li>▪ Qualified personnel</li> <li>▪ Up-to-date equipment/technology</li> </ul>	- Annual budget and FTP appropriation support accomplishment of Mission and strategic goals	<ul style="list-style-type: none"> <li>▪ Operate within the approved budget and FTE appropriations</li> <li>▪ Fund balance equals 12 months operating costs</li> <li>▪ All approved staff positions are filled/staff perform at or above the expectations for their positions</li> <li>▪ Identify and maintain outside contracts for selected projects</li> <li>▪ Technology and equipment are consistent with the IT plan</li> <li>▪ Strict adherence to internal control policies</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Board &amp; Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ FY 2010</li> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ Ongoing</li> </ul>
<i>O.2. Staff activities facilitate accomplishment of the Board's Mission and goals</i>	- Positive annual Board self-assessment related to support by staff	<ul style="list-style-type: none"> <li>▪ Feedback following Board meetings indicates appropriate Board and meeting preparation and staff and attorney support</li> <li>▪ Deficiencies in staff performance and support are identified and corrected</li> <li>▪ Review and modify the self-assessment instrument as necessary</li> </ul>	<ul style="list-style-type: none"> <li>▪ Board</li> <li>▪ Staff</li> <li>▪ Board &amp; Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ Quarterly</li> </ul>
<i>O.3. Expectations of the public, licensee, Legislature and Governor about the Board are met</i>	<ul style="list-style-type: none"> <li>- Board is recognized for CORE 'best practices'</li> <li>- Positive feedback is received from constituent groups</li> </ul>	<ul style="list-style-type: none"> <li>▪ Active participation in NCSBN CORE</li> <li>▪ Annual review of CORE data</li> <li>▪ Investigate and address complaints about agency</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Board</li> <li>▪ Board/Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ Annual</li> <li>▪ Ongoing</li> </ul>
<i>O.4. Competent Staff</i>	- Staff meet annual performance expectations for key job responsibilities, customer service, and interpersonal relationships	<ul style="list-style-type: none"> <li>▪ Orient new staff to position knowledge/skill expectations</li> <li>▪ Staff are cross trained to related positions for support and backup</li> <li>▪ Staff participate in internal and external development activities</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ On-going</li> <li>▪ FY 2008</li> </ul>

Objective	Performance Measure	Benchmarks	Responsibility Assigned	Timeframe
<i>O.5. Staff compensation recognizes performance, longevity, outstanding contributions and market trends and retains exemplary workers</i>	- Staff compensation is consistent with the Board's philosophy and governance policy and is consistent with legislative directives	<ul style="list-style-type: none"> <li>▪ Adjust staff compensation consistent with performance evaluation and compensation policy</li> <li>▪ Attempt to move all staff to the midpoint of their salary scale within 5 years of beginning employment</li> <li>▪ Award compensation based on performance, length of service and market trends</li> <li>▪ Implement the Board plan for ED compensation</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Board</li> </ul>	<ul style="list-style-type: none"> <li>▪ Annually</li> <li>▪ Ongoing</li> <li>▪ Annually</li> <li>▪ FY 2007-09</li> </ul>
<i>O.6. Office of the Board of Nursing supports the day-to-day operation of the organization</i>	- The office of the Board of Nursing, including physical location, space and furnishings, equipment and staff, support the day-to-day operation of the Board	<ul style="list-style-type: none"> <li>▪ The office of the Board of Nursing is publicly convenient, accessible, cost-effective, and consistent with the professional image of the Board</li> <li>▪ Staff are adequate in number and qualified for responsibilities and functions of the agency</li> <li>▪ Staff are prepared for their assigned responsibilities</li> <li>▪ Extended lease for office space is maintained</li> <li>▪ Public is informed of the location and access to the BON office</li> </ul>	<ul style="list-style-type: none"> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> <li>▪ Staff</li> </ul>	<ul style="list-style-type: none"> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ Ongoing</li> <li>▪ FY 2010</li> <li>▪ Ongoing</li> </ul>

## **GLOSSARY OF ACRONYMS AND ABBREVIATIONS**

<b>APRN</b>	Advanced Practice Registered Nurse
<b>APPN</b>	Advanced Practice Professional Nurse
<b>CORE</b>	Commitment to On-going Regulatory Excellence: A Research Project of the National Council of State Boards of Nursing
<b>HIPDB</b>	Health Integrity and Protection Data Bank
<b>LPN</b>	Licensed Practical Nurse
<b>MA-C</b>	Certified Medication Assistant
<b>NCLEX</b>	National Council Licensure Examination for RNs/LPNs
<b>NCSBN</b>	National Council of State Boards of Nursing
<b>NLC</b>	Nurse Licensure Compact
<b>NLCA</b>	Nurse Licensure Compact Administrators
<b>NPDB</b>	National Practitioner Data Bank
<b>NURSYS</b>	Nurse Licensure Information System
<b>PRN</b>	Program for Recovering Nurses
<b>RN</b>	Licensed Professional/Registered Nurse
<b>TERCAP</b>	Taxonomy of Error: Root Cause Analysis and Practice Responsibility: A Project of the National Council of State Boards of Nursing